



GENERAL SERVICES DEPARTMENT

ENGINEERING DIVISION

276 Fourth Avenue Chula Vista CA 91910

619-691-5021

619-691-5171 FAX

DRIVEWAY VARIANCE APPLICATION

File No. 0710-29-PA-005

FORM 5517

Application Fee: \$250.00

(Acct. No. 10643-3741, Trans 3802)

Job Location _____

APN _____

Company/Applicant's name _____

Phone No. _____

Mailing address _____ City _____ State _____ Zip _____

This request is for: [] Widening existing driveway. Total width: _____ Feet

[] Additional driveway with a total width of: _____ Feet

[] Location of driveway.

Lot Frontage: _____ Feet 40% of Lot Frontage: _____ Feet

If Variance is for second driveway, width of existing (including flares): _____ Feet

Reason for request: _____

NOTE: Applicant to include drawing or sketch showing location of any existing and/or proposed driveways. Sketch should show: dimensions of all driveways; their locations in relation to side property lines and curb returns (street corners).

Signature of owner or agent: _____ Date: _____

Print Name if agent only: _____